

**Political Organization
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See separate instructions.

A For the period beginning 11/23/2010 **and ending** 12/31/2010

B Check applicable box: ☒ Initial report ☐ Change of address ☐ Amended report ☒ Final report

1 Name of organization Iowans For Responsible Government **Employer identification number** 27 - 2499774

2 Mailing address (P.O. box or number, street, and room or suite number)
2501 Westown Parkway Suite 1201

City or town, state, and ZIP code
West Des Moines, IA 50266

3 E-mail address of organization: no@email **4 Date organization was formed:** 05/05/2010

5a Name of custodian of records Robert G Tully **5b Custodian's address** 2501 Westown Parkway Suite 1201
West Des Moines, IA 50266

6a Name of contact person Rob Tully **6b Contact person's address** 2501 Westown Parkway Suite 1201
West Des Moines, IA 50266

7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number
2501 Westown Parkway Suite 1201
City or town, state, and ZIP code
West Des Moines, IA 50266

8 Type of report (check only one box)

- ☐ First quarterly report (due by April 15)
☐ Second quarterly report (due by July 15)
☐ Third quarterly report (due by October 15)
☒ Year-end report (due by January 31)
☐ Mid-year report (Non-election year only-due by July 31)
- ☐ Monthly report for the month of:
(due by the 20th day following the month shown above, except the December report, which is due by January 31)
☐ Pre-election report (due by the 12th or 15th day before the election)
(1) Type of election:
(2) Date of election:
(3) For the state of:
☐ Post-general election report (due by the 30th day after general election)
(1) Date of election:
(2) For the state of:

9 Total amount of reported contributions (total from all attached Schedules A).....9. \$ 0

10 Total amount of reported expenditures (total from all attached Schedules B).....10. \$ 2259

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Rob Tully

01/10/2011

**Sign
Here**

Signature of authorized official

Date

Schedule B Itemized Expenditures		Schedule B
Recipient's name, mailing address and ZIP code Democratic Governors Association 1401 K Street, NW Suite 200 Washington, DC 20005	Name of recipient's employer N/A Recipients's occupation N/A	Amount of Expenditure \$ 2259 Date of expenditure 12/24/2010
Purpose of expenditure Refund		